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Lamont Hunter  
PCT International Division  
(703) 305-3366

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. <b>10/069312</b>		FILING DATE		
							APPLICANT(S)				
CLAIMS											
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.
1							51				
2							52				
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45							95				
46							96				
47							97				
48							98				
49							99				
50							100				
TOTAL ID.	3						TOTAL IND.				
TOTAL EP.	23						TOTAL DEP.				
TOTAL CLAIMS	26						TOTAL CLAIMS				

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\*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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